Airport Security Division
Access Control and ID Badging
700 Catalina Drive, Suite 110
Daytona Beach, Florida 32114
(386)-248-8030

Initial ☐ Renewal ☐

Application for Airport AOA Identification Media

Last Name	First Name	Middle Name			
Social Security # *(Voluntary)*	**Date of Birth**	**State / Country of Birth**			
- -	/ /				
Home Address					
City	**State**	**Zip Code**			
Home Phone #	**Sex**	**Height**	**Weight**	**Eye Color**	**Hair Color**
( ) -					
Driver License #	**State**	**License Expiration**			
		/ /			
Company Name	**Company Phone**	**Job Title**			

Citizenship Statement (Required)

Other Names Used (aliases, maiden names)	Country of Birth:
Current Residence (city, state, zip) ☐ Same as above	Country of Citizenship:

I attest, under penalty of perjury, that I am <u>one</u> of the following:

☐ A citizen of the United States* ☐ A Lawful Permanent Resident** ☐ An alien with work authorization***

*** US Citizens must complete this section completely.**
US citizenship is by:

☐ birth ☐ naturalization ☐ other (specify): _____

If you are a US citizen by any means other than birth, you must provide an original Naturalization Certificate or US Passport.

**** All lawful permanent residents must complete this section <u>and</u> provide original resident alien card.**

Alien Registration Number: A_____ _____ _____

***** All aliens with work authorization must complete this section <u>and</u> provide original Employment Authorization Document (EAD) card.**

Employment Authorization Document Number:	Expiration Date:

I understand that federal law provides for imprisonment and/or fines for falsely claiming to be a United States Citizen, or for making false statements, or for using false documents in connection with the completion of this form. (see Section 1001, Title 18, United States Code)

Signature:	Date:

Volusia County Privacy Statement

Pursuant to the requirements of Public Law 93-579 (Privacy Act of 1974), notice is hereby given that the authority to collect information requested on the Daytona Beach International Airport Badge Application for a new and/or renewal Airport Identification Badge is 42 U.S.C. 301, Reorganization Plan No. 1 of 1953; and U.S.C. Section 552a. Disclosure of the requested information is not mandatory. Applicant is advised, however, that the principal purpose for collecting the information is to enable the sponsor/employer and/or the VCAD to conduct a Security Threat Assessment (STA) and thereby determine whether the applicant meets the criteria required for the issuance of an AOA badge. The identification badge will not be issued unless the STA is completed and the employee meets the required criteria. The information may also be used, when deemed appropriate, in a proceeding to revoke or suspend the identification badge. The information collected and contained in the applicant's file may be provided to any and all employees of VCAD who have a need for the records in the performance of their duties. The ASC is the individual point of contact if you have any questions about the results of the Security Threat Assessment (STA).

Signature	Date

TSA Privacy Act Notification

Authority: 49 U.S.C Sections 114, 44936 authorizes the collection of this information

Purpose: The Department of Homeland Security (DHS) will use the biographical information to conduct a Security Threat Assessment (STA) and will forward any fingerprint information to the Federal Bureau of Investigation to conduct a Criminal History Records Check (CHRC) of individuals who are applying for, or who hold, an airport-issued identification media or who are applying to become a Trusted Agent of the airport operator. DHS will also transmit the fingerprints for enrollment into the US-VISIT's Automated Biometrics Identification System (IDENT). If you provide your Social Security Number (SSN), DHS may provide your name and SSN to the Social Security Administration (SSA) to compare that information against SSA's records to ensure the validity of your name and SSN.

Routine Uses: This information may be shared with third parties during the course of an STA, employment investigation, or adjudication of a waiver or appeal request to the extent necessary to obtain information pertinent to the assessment, investigation, or adjudication of your application or in accordance with the routine uses identified in the Transportation Security Threat Assessment System (T-STAS), DHS/TSA 002.

Disclosure: Furnishing this information (including your SSN) is voluntary; however, if you do not provide your SSN or any other information requested, DHS may be unable to complete your application for identification media.

Signature	Date

Applicant Responsibilities

1. All identification badges remain the property of the Volusia County Airport Department (VCAD). The badge is non-transferable to any other person.
2. The badge must be displayed on the upper portion of the body, on the outermost garment, and must be clearly visible while in the Secured Area, SIDA, or AOA. The badge must be clearly visible and recognizable when worn. If a container or holder is used, that container or holder must be uncolored and clear. The badge is not to be defaced in any manner. No other markings or stickers may be added to the badge.
3. Everyone issued an identification badge must challenge and, if applicable, provide escorts according to training.
4. Identification badges are issued for security purposes and are subject to the rules and regulations of the Federal Aviation Administration, the Transportation Security Administration, VCAD, and the sponsoring tenant.
5. Expiring badges must be renewed prior to the expiration date on the face of the badge. Door access is automatically revoked on the expiration date. Most badges expire in two (2) years. Airport Ground Vehicle Operators (AGVO) recurrent training is required annually. Contractor badges are issued for the duration of the project, up to two (2) years.
6. Recurrent AOA training is required bi-annually and must be completed within the three-months prior to badge expiration. This training will consist of reading a handbook and achieving a 90% or higher on a 12 question quiz.
7. AOA badge holders who do not renew expired badges within thirty (30) days of expiration will need to complete a new badge application and undergo a new security threat assessment before a new badge will be issued. Use of an expired badge is a violation and may result in denial of badge renewal, criminal penalties, and/or civil penalties.
8. VCAD must be notified immediately of any lost/stolen badges. **A fee of $50 is charged for a first lost/stolen badge. A fee of $100.00 is charged for a second lost/stolen badge or one not returned upon termination of employment.** If a badge holder has lost two badges, requests for additional replacements must be approved by the ASC or Director of Aviation.
9. Badge holders must immediately notify VCAD if they become aware that any access control portal, access control system or a component thereof has been breached, compromised, or threatened by any means.
10. Please note that badge applicants will need to provide two forms of identification when submitting their application, one of which is government issued. In addition, one of them must be a photo-ID. The preferred forms of identification are a passport or a driver's license and a social security card. Badge applicants who do not have these forms of identification, should contact their employers for acceptable alternate forms.
11. Badge holders agree to abide by all applicable Federal, State, local, and VCAD rules, regulations, laws, ordinances, and training received relative to his/her term of employment or term of lease at the Daytona Beach International Airport.
12. Volusia County Airport Department (VCAD) reserves the right to deny a badge application for any reason.

Signature	Date

Social Security Certification

(NOTE TO APPLICANTS: This section is <u>optional</u>. Only sign if SSN provided on front page)

I authorize the Social Security Administration to release my social security number and full name to the Transportation Security Administration, Office of Threat Assessment and Credentialing (TTAC), Attention: Aviation Programs (TSA-19) Aviation Worker Program, 601 South 12th Street, Arlington, VA 20598.

I am the individual to whom the information applies and want this information released to verify that my SSN is correct. I know that if I make any representation that I know is false to obtain information from my Social Security records, I could be punished by a fine, imprisonment, or both.

Applicant Signature	Date of Birth
Social Security Number	Full Name (printed)

Authorized Signatory/Manager Approval Section

(NOTE TO APPLICANTS: Do Not Sign This Section)

Requested Privileges:

Non-Movement/PSR Driving ☐ Movement Area Driving ☐ Escort Authority ☐

No Additional Privileges ☐

I understand that our company is responsible for this individual's ID Media (airport badge) and hereby agree to the following provisions and charges:

Provision #1 – Termination of Employment and/or Expired Badge:

Airport badge shall be returned within five (5) business days upon termination of employment and/or from badge expiration date otherwise a charge of $100.00 will be assessed.

Provision #2 – Lost and/or Broken Badge:

A lost and/or misplaced airport badge shall be reported immediately upon knowledge of loss. A fee of $50 is charged for a first lost/stolen badge. A fee of $100.00 is charged for a second lost/stolen badge. A $15 fee will be assessed for a broken badge. The same $15 fee may apply to badges that are unreadable.

I understand it is my responsibility to immediately notify the Airport Security Office via telephone or in person any time an individual's access authority is to be limited or revoked, an individual's ID Media has been lost or stolen, or if I believe any component of the airport's security system has been compromised in any way. This is to be followed up by written notification to the Airport Security Coordinator within 24 hours.

All coordination shall be with the Airport Security Office at the Daytona Beach International Airport. I understand it is my responsibility to report to the Airport Security Office information as it becomes available that indicates an individual with unescorted access authority may have a disqualifying criminal offense. Additionally, I understand that it is my responsibility to report to the Airport Security Office when the individual has an expired form I-9 employment eligibility verification document issued by the U.S. Citizenship and Immigration Service and is no longer authorized to work, if applicable.

Company	Print Name
Signature	Date

For Office/Airport Security Coordinator's Use

Application received: _____/_____/_____ STA Input: _____/_____/_____

Background Investigations

STA:
Number: _____
Completion Date: _____/_____/_____

Approved:
Yes ☐ No ☐

Signature of submitting agent: _____ Date: _____/_____/_____

Airport Security Coordinator Approval

This applicant may be badged: Yes ☐ No ☐
Signature: _____ Date: _____/_____/_____

AOA Quiz Date:
_____/_____/_____

Badgeholder Privileges

Privileges Granted
(check if applicable)

Escort ☐

Driving Privileges Granted
(check one if applicable)

Movement ☐ Non-movement/PSR ☐

Date of driver training: _____/_____/_____

Badge Status

Issued by: _____ _____ Badge Number: _____
Trusted Agent Signature

Date issued: _____/_____/_____ Expiration date: _____/_____/_____ Lost: _____/_____/_____

Date returned: _____/_____/_____ Date Reissued: _____/_____/_____ Reason: _____